

## **DEPARTMENT OF TRANSPORTATION**

# **FORMS FOR BID**

### FOR CONSTRUCTION ON STATE HIGHWAY IN ALAMEDA COUNTY, IN FREMONT, FROM 0.15 MILE SOUTH OF SCOTT CREEK ROAD UNDERCROSSING TO AUTOMALL **PARKWAY OVERCROSSING**

In District 04 On Route 680

#### Under

Notice to Bidders and Special Provisions dated October 23, 2017	Standard Specifications dated 2015
Project plans approved July 5, 2017	Standard Plans dated 2015

#### Applicable to

Electronic Bid book dated October 23, 2017 Identified by Contract No. 04-3G6034 04-Ala-680-M0.0/M4.0 Project ID 0417000128

> **Federal-Aid Project** ACIM-680-1(081)E

#### **DBE - COMMITMENT**

DES-OE-0102.10D (REV 12/2014)

ADA Notice

CONTRACT NO:							
BID AMOUNT:							
\$							
BID OPENING DATE:							
BIDDER'S NAME:							
DBE GOAL FROM CONTRA	ACT %:						
DBE PRIME CONTRACTOR	R CERTIFICATION <sup>1</sup> :	TOTAL NUMBER OF AL	L SUBCONTRACTS (DBE &	NON-DBE)	TOTAL VALUE OF ALL SUBCONTRAC	CTS (DBE & NON-DBE)	
BID ITEM NO.	ITEM OF WORK AN SERVICES TO BE SU MATERIALS TO	JBCONTRACTED OR	WORK CATEGORY CODES <sup>3</sup>	opened.	NAME OF DBEs st be certified on the date bids are Include Caltrans' certification no., DBE s, and phone number. Show 2nd and lower tier subcontractors)	AMOUNT (\$)	
Show all DBE firms being each DBE shown stating shown for the specific am	that it will be participatin			Total Claimed Participation		\$	
The names of the 1st tier Subcontractor List (Pub 0			e consistent with the			%	
<sup>1</sup> Each DBE prime contractor must enter its certification number and show all work to be					The bidder acknowledges that it is committed to use the DBEs shown on this form to meet the contract goal (49 CFR 26.53).		
<sup>2</sup> If 100% of an item is not the item to be performed		nished by the DBE, des	cribe the exact portion of				
<sup>3</sup> Use Work Category Codes from the California Unified Certification Program database.					gnature of Bidder		
				Da	te (Ar	ea Code) Tel. No.	
				De	rson to Contact (Ple	ase Type or Print)	
				, F6	ison to contact (Ple	ase type of Fillity	
				•			

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#### **DBE CONFIRMATION**

DES-OE-0102.13 (NEW 05/2015)

	<u> </u>		
Contract no.:			
Name of DBE business:			
Name of DBE representative	): :		
DBE certification number:			
Name of bidder:			
Name of prime contractor if	different from the bidder:		
Name of representative of bi	idder or prime contractor:		
Date:			
Bid item number	Item of work and description of services to be subcontract	cted or materials to be provided <sup>1</sup>	Amount (\$)
<sup>1</sup> If 100% of an item is not to portion of the item to be per	be performed or furnished by the DBE, describe the exact rformed or furnished.	Total	
		enterprise, I confirm that my busin	lder or prime contractor to perform
		I certify under penalty of perjury th	at the foregoing is true and correct.
		Signature of DBE's authorized	representative:
		Printed name of DBE's authori	zed representative:
		Title of DBE's authorized repre	esentative:
		Date:	_

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#### **DBE GOOD FAITH EFFORTS DOCUMENTATION**

DES-OE-0102.11A (REV 12/2014)

Bidder's Name:	
Contract No.: _	

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1. List items of work the Bidder made available to DBE firms. Identify items of work the Bidder might otherwise perform with its own forces, items that have been broken down into economically feasible units to facilitate DBE participation, and items for which the Bidder has established flexible time frames for performance and delivery schedules in a manner that encourages and facilitates DBE participation. For each item listed, show the dollar value and percentage of the total contract. The Bidder must demonstrate that sufficient work to meet the goal was made available to DBE firms.

Item of Work Offered, Services Offered, or Materials Supplied	Perfor	Normally ms Item s/No	Item Broken Down to Facilitate Participation Yes/No		Established Flexible Timeframes for Performance and Delivery Schedules Yes/No		Amount (\$)	Percentage of Total Bid
	YES	Пио	YES	Пио	YES	□ NO		
	YES	□ NO	YES	□ NO	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	Пио	YES	Пио	YES	NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	□ NO	YES	□ NO	YES	□ NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	NO		
	YES	□ №	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	NO		
	YES	Пио	YES	NO	YES	NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	□ №	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	□ NO	YES	Пио	YES	□ NO		
	YES	NO	YES	Пио	YES	□ NO		
	YES	NO	YES	Пио	YES	□ NO		

#### **DBE GOOD FAITH EFFORTS DOCUMENTATION**

Bidder's Name:	
Contract No.:	

DES-OE-0102.11A (F	REV 12/2014)							Page 2 of 3
						clude the items of work offered a copies of solicitations, e-mail me		
Name of DB	E Solicited	Date of Ir	nitial Solicitation		Items of	Work Offered	Follow Up Me	thods and Dates
	vided quotes, the	e price quote for e	ach firm, and the p	orice dif	fference for each DBE	pecific to the items of work being Eifthe selected firm is not a DBE act.		
Items of Work	Specifications	ed Plans/ for Work Offered s/No	Name of Selection	cted	DBE or Non-DBE	Name of Rejected Firm	Quote (\$)	Price Difference (\$)
	YES	□NO						
	YES	□ио						
	YES	□ио						
	YES	□ио						
	YES	□ио						
	YES	□ио						
	YES	Пио						
	YES	Пио						
	YES	Пио						
If the firm selected for the Provide evidence as to						nd attach names, addresses, and	phone numbers for the	firms listed above.

Bidder's Name:	
Contract No.:	

DBE GOOD FATH EFFOR DES-OE-0102.11A (REV 12/2014)	RTS DOCUMENTATION		Page 3 of 3						
4. Describe the Bidder's outreach efforts to identify and solicit the interest of all certified DBEs that have the capability to perform the work of the Contract. Provide copies of supporting documents.									
Description of Outreach	Dates	Location (if applicable)	Results						
	le interested DBEs with adequate information a assisted, the type of information provided, and								
Describe the Bidder's efforts made to assist dates. Provide copies of supporting document	interested DBEs in obtaining bonding, lines of s.	credit, or insurance. Identify the DBEs assisted	d, the type of assistance offered, and the						
equipment the DBE purchases or leases from documents. List efforts made to assist interest	interested DBEs in obtaining necessary equip the prime contractor or its affiliate. Identify the ed DBEs in obtaining bonding, lines of credit, in bcontractor purchases or leases from the primi	DBEs assisted, the type of assistance offered, nsurance, necessary equipment, supplies, mat	and the dates. Provide copies of supporting erials, or related assistance or services,						
B. List the names of agencies and the dates on which they were contacted to provide assistance in contacting, recruiting, and using DBE firms. If the agencies were contacted in writing, provide copies of supporting documents.									
9. Include additional data to support a demonstration of good faith efforts.									
NOTE: USE ADDITIONAL SHEETS OF PAPE	ER IF NECESSARY.								

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